Barbara Campbell National Stage Processing (703) 305-3831

PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					
	PATENT	PRD	09/937498										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
Ľ	OTAL CLAIM				and the second		RATE	FEE	7	RATE	FEE		
F	OR	NUMBE	NUMBER FILED		NUMBER EXTRA		ASIC FE	 -	OR				
TOTAL CHARGEABLE CLAIMS			16 m	16 minus 20=				XS 9=	1	7	1 Vara	1800	
١Ņ	DEPENDENT (<i></i>			2					X\$18=	ļ		
М	ULTIPLE DEPE	NDENT CLAIM I						X40≃		OR	X80=	160	
· II the difference in							j	+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							-	TOTAL	 	OR	TOTAL		
C	CLAIMS AS AMENDED - PART II							ī			OTHER	THAN	
7	1010101	(Column 1)	Section 5.	(Colum		(Column 3)	<u></u>	MALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL NFEE	
	Total	. 16	Minus	2	0	=0		X\$ 9≃		OR	X\$18=		
AM	Independent	· 4	Minus		5	= 0		X40=		1	X80=	\	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		-			OR	700=		
							L	135=		OR	+270=		
	(a)							TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
—— m		(Column 1)	Val. 1 Comes	(Colum		(Column 3)				_			
AMENDMENT E		REMAINING AFTER AMENDMENT	Hard Const.	NUMB PREVIO PAID F	ER . USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		2	>	(\$ 9=		OR	X\$18=		
	Independent	MITATION OF AN	Minus	<u> </u>		=	 	<40=		1 1	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	700-		
							L	135=		OR	+270=		
							ADD	TOTAL IT. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)						;	
AMENDMENT C	et (s. e.	REMAINING AFTER AMENDMENT	10 m	NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	•	Minus	••		=	×	\$ 9=	166	}	X\$18=	FÉE	
	Independent	•	Minus	•••		=	-			OR			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						⊢ [×]	40=		OR	X80=		
· If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							35=		OR	+270=		
٠۱	* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." The "Highest Number Previously Paid For" (Total or Independent) is the highest number to									OR.A	TOTAL DDIT. FEE		

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